

Scituate Community Preservation Committee

Funding Request Form

DATE and YEAR of Application: Revised February 21, 2022

APPLICANT INFORMATION

Contact Name & Address: Anthony Meschini 140 Hollett Street, Scituate, Ma 02066

Telephone Number: 630-263-1375 Email: tonymeschini2004@yahoo.com

PROJECT INFORMATION

CPA CATEGORY (check all that apply):

OPEN SPACE

RECREATION

HISTORIC PRESERVATION

COMMUNITY HOUSING

NAME OF PROJECT: To Be Determined

BRIEF DESCRIPTION OF PROJECT: 2.3 acres of upland property that abuts Purple Dinosaur

Attach additional 20 pages - 4-38 including abutment summary, Town of budget, Scituate estimated playground timeline and justification of need.

Project Location or Address: _____

Include map, photo and other imagery for ALL category projects.

If Open Space or Community Housing:

Number of acres in parcel: 2.3 acres

Assessor's Map Page, Block & Lot Number: lot 20-4-38

Current Zoning Classification: _____

Title in name of: Anthony Meschini

Title Abstract Date: 4/14/2014

Assessed Value: _____

Number of housing units proposed: None

Proposed Funding

| <small>1-000000</small> Total Project Cost | <small>2-000000</small> CPC Funds Requested | <small>0000</small> Sources of Funds other than CPA | <small>1-000000</small> Amount | <small>10/17/2021</small> Funding Secured? (Y/N)* |
|---|--|--|-----------------------------------|---|
| \$ 41,000 | \$ 41,000 | | | |
| | | | \$ | |
| | | | \$ | |
| | | | \$ | |
| | | | \$ | |

** If the request is still outstanding, when do you expect to hear a decision?*

OTHER COMMENTS

Provide any other information you think the CPC should be aware of in evaluating your request for funding.

By signing below, the Applicant represents he/she is duly authorized, agrees to the terms and conditions and all other requirements of this Application and agrees to be bound Thereby if funding is granted for the Project.

Date: 2/21/22 Signature: Anthony Meschini

FOR COMMUNITY PRESERVATION COMMITTEE USE

This request received by Scituate CPC on _____

Copies provided to CPC Members on _____

Additional information required: _____

Committee Vote

| Votes: | Yes / No | Votes: Y/N/Abstain | Date |
|------------------------------|----------|-----------------------|------|
| Recommend to Town Meeting | | | |

Other: _____
